

# Registration Form

## FILL OUT COMPLETELY. PLEASE PRINT

ADULT LAST NAME \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

E-mail (if you desire to receive Recreation Department program information): \_\_\_\_\_

### How did you learn about our programs? (Please select one)

☐ Recreation brochure ☐ City Website ☐ City employee ☐ Friend ☐ Newspaper ☐ Flyer ☐ Repeat Customer ☐ Other

- Does the participant need special accommodations for a successful experience?  
A two-week advanced notice is required (Check Y or N), below



## PARTICIPANT INFORMATION. PLEASE PRINT

Class #	Swim Sess.	Class Title	Participant's Last Name	First Name	MI	Sex	Date of Birth	Fee	Y* N*

Please choose classes carefully, the NO REFUND Policy will be followed.

Returned Checks: There will be a minimum service charge of \$25 on all checks returned from the bank.

READ, SIGN AND DATE WAIVER BELOW. Unsigned waivers will cause your registration to be returned unprocessed.

### ACCIDENT WAIVER AND RELEASE OF LIABILITY (AWRL)

TOTAL FEES DUE \$

I, \_\_\_\_\_ (REGISTRANT) and I, \_\_\_\_\_ \*(REGISTRANT's parent or guardian), acknowledge that this activity may be an extreme test of REGISTRANT's physical and mental limits and that it could result in death, injury and property loss. Risks may derive from terrain, facilities, water conditions, weather, condition of equipment, vehicular traffic, actions of others, lack of hydration, as well as other sources. I hereby assume all risks of REGISTRANT's involvement in this activity. I certify that REGISTRANT is physically fit, has sufficiently trained for participation in this activity and has not been advised otherwise by a qualified medical person. I acknowledge that this AWRL form will be used by the City of Chula Vista and the activity holders, sponsors and organizers, in which REGISTRANT may participate and that it will govern REGISTRANT's actions and responsibilities at said activities. In consideration of REGISTRANT being permitted to participate in this activity, and on behalf of myself, my executors, administrators, heirs, successors and assigns, I hereby (A) WAIVE, RELEASE AND DISCHARGE FROM LIABILITY The City of Chula Vista and its directors, officers, employees, volunteers, representatives and agents, and the activity holders, sponsors, directors and volunteers, for the death, injury or property loss or damage of REGISTRANT or actions of any kind which my accrue to me as a result of REGISTRANT's participation in this activity; and (B) agree to INDEMNIFY AND HOLD HARMLESS the above-mentioned entities or persons from any and all liabilities or claims made by other individuals or entities as a result of any of REGISTRANT's actions during this activity except for those claims arising from the sole negligent or willful conduct of The City of Chula Vista or its agents. I hereby consent to the administering of medical treatment to REGISTRANT if deemed advisable in the event of injury, accident and/or illness during this activity. I understand that all this activity or related activities, REGISTRANT may be photographed. I agree to allow REGISTRANT's photo, video, or film likeness to be used for any legitimate purpose by the event holders, sponsors, directors and their agents or assigns. This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document and understand its content. I further certify that I am the parent or guardian of the above-named participant and that I will hold each of the above-named individuals and entities, harmless and indemnify each in the event of any loss whatsoever due to a defect in my legal capacity.

REGISTRANT's Parent or Guardian's Signature \_\_\_\_\_ Date \_\_\_\_\_

\*If the participant is under 18 years of age or legally incapacitated, the parent or guardian must also sign.

Make checks payable to "CITY OF CHULA VISTA" \*Individuals who do not reside within the city limits of Chula Vista must pay the Non-Resident fee listed for each class.

Failure to send correct amount could result in delay or denial of your priority class.

Send your registration to the Recreation Department for all recreational classes. Be sure to indicate session number for all swimming classes.

## RECREATIONAL CLASSES

City of Chula Vista Recreation Department, 276 Fourth Avenue, Chula Vista, CA 91910 Attn: Jimmy Tollefson (Mail Stop R-107)

FOR OFFICE USE ONLY: Amount Enclosed \$ \_\_\_\_\_ CK/MO# \_\_\_\_\_ Bank # \_\_\_\_\_ City Receipt # \_\_\_\_\_

# Registration Information

## Walk-In Registration

**August 28 - September 23**

Walk-in registration for fall classes will be taken on a first come, first served, space-available basis, beginning the last week of the summer session. Register Monday - Friday from 3 - 7 pm, and Saturday from 12 - 3:30 pm at the Chula Vista Community Youth Center, Heritage Park Center, Loma Verde Recreation Center, Monteville Recreation Center, Otay Recreation Center, Parkway Community Center, Salt Creek Recreation Center, and Veterans Park Recreation Center. Registration will be taken at all facilities for any class, regardless of its meeting location. Those registering will be asked to complete the registration form and provide payment in the preferred form of check or money order. Cash in the exact amount will also be accepted. Please note, on the first day of registration, August 28, all Recreation Centers will begin registration at 2 pm.

## Financial Assistance

**August 21 - September 8**

Recreation Class Applications are available starting August 21 at all Recreation Centers. A minimum of three working days is required to review application after which applicants will be notified. All Financial Assistance applicants will be required to participate in walk-in registration August 28 - September 23 and will not be registered in classes until fee balance has been paid. Swimming Classes and Camp Applications are available at Recreation centers, pools, and Parkway Gymnasium, and must be submitted no later than 14 days prior to the start of the class, camp, or activity. Applicants for these activities will not be registered until the balance of fees has been paid. More detailed information is contained on the Financial Assistance Application Forms.

## Online Registration

**Begins August 28**

The Recreation Department is continuing an online registration process for the Fall session.

Go to [www.chulavistaca.gov/rec](http://www.chulavistaca.gov/rec) and link to online registration. Please note: A nominal, non-refundable fee is charged in addition to the class fee for the online service provided by a registration vendor. Questions? Call (619) 691-5083 for additional information.

## Mail-In Registration

**August 28 - September 9**

- The Registration Form is to be used only for the Recreation Department classes listed on pages 8-28 of this brochure.
- Do not combine with registrations for any other program or agency (youth sports, YMCA, Boys & Girls Club).
- Registration will be accepted by mail on the dates listed, on a first received, first processed, space-available basis.
- Print and fill out form completely.
- Mail-in registration is only for classes preceded by an activity number.
- Register for classes at the locations where those specific classes will be held.
- Applications postmarked before August 28 or after September 9 will be returned unprocessed.
- Send a check or money order for the total payment due payable to "City of Chula Vista."
- Separate checks for each recreation class are not required. Bankcards will not be accepted for walk-in or mail-in registration. Do not send cash.
- Individuals who do not live within the city limits of Chula Vista will be required to pay the nonresident fee listed for each class. Proof of residency may be required.
- Mail to: City of Chula Vista Recreation Dept.  
Attn: Jimmy Tollefson, MS R-107  
276 Fourth Avenue,  
Chula Vista, CA 91910

## Cancellations

A minimum number of participants is required to hold class. The Recreation Department reserves the right to cancel any class when enrollment is low. To help assure that classes have the required number of participants, please register early. An automatic refund will be issued if the department cancels a class.

## Refunds and Transfers

Refunds are not issued unless classes are cancelled. Refunds will be processed and mailed approximately 3-4 weeks after classes begin. Transfers and/or credits may be approved under certain limited conditions. Online registration processing fee is non-refundable.

## Want to Teach a Class?

The Recreation Department is always searching for qualified instructors to teach new or existing classes. If you are interested in being a contractual instructor, contact the corresponding center supervisor.

### Community Youth Center

Jimmy Tollefson (619) 585-5735

### Heritage Park Community Center

Tony Ramos (619) 421-7032

### Loma Verde Recreation Center

Sandy Chavez (619) 691-5082

### Norman Park Senior Center

Karen Harvell (619) 691-5086

### Monteville Recreation Center

Shaun Ellis (619) 585-5680

### Otay Recreation Center

Michelle Castagnola (619) 476-5325

### Parkway Community Center

Frank Carson (619) 691-5083

### Salt Creek Recreation Center

Steve Scott (619) 585-5653

### Therapeutic Programs

Carmel Wilson (619) 409-5800

### Veterans Park Recreation Center

Victoria Tom (619) 691-5260

**NOTE:** Fees for classes DO NOT include any additional costs that may be required (i.e. ballet slippers, leotards, martial arts uniforms, tap shoes, etc.)